

BARBARA K. CEGAVSKE Secretary of State **Elections Division** 101 North Carson Street, Suite 3 Carson City, Nevada 89701-3714 Phone: (775) 684-5705

Fax: (775) 684-5718 Website: www.nvsos.gov

## **State of Nevada Committee for Political Action** (PAC)

Registration Form

Office of the Secretary of State Barlena Cegauske

Barbara Cegavske **Elections Division** 

**JStokes** 

1/06/2016

# 756

	_			E IS FOR OFFICE USE ONLY
New Registration	PAC (Advocatir	ng Passage or Defeat of a Ballot Qu	estion)	
Annual (Due on or before Jar	nuary 15th of <u>each</u> ;	year; NRS 294A.230(4)(b))		
Amended Registration:	Change Officen	hange Officers Change Registered Agen		Change Address
	Change Name	Previous Name of PAC		
	Other:			
Name of Committee:	to amount of the control of the cont		Teleph	none:
Nevada Beer Wholesalers PAC	province of the CDD will be the SDD to the CDD to the suppression region in property and the CDD to the suppression of the CDD		775-82	23-2900
Mailing Address:				
50 West Liberty Street, Suite 410		Reno		89501
Street Name, Number		City	State :	Zip Code
PAC Active Email Address: aalon	so@lrrc.com			
		each PAC must appoint and keep in		
	, who must be a ha	tural person who resides in the State		
Name of Registered Agent:	TIC	memorphism parties of the parties of	Teleph	Man representative our sales that the
L and R Service Company of Nevada	LLC		775-82	3-2900
Physical Address:	1.			00.50+
50 West Liberty Street, Suite 410 Street Name, Number		Reno		89501 Zip Code
REGISTERED AGENT ACCEPTA Committee for Political Action.  X Signature of Registered Agent		cept appointment as Registered Age  Date: 1 4 2016	ent for t	
EL400 Revised 11-5-15				Page 1 of 2



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## State of Nevada **Committee for Political Action** (PAC) Registration Form

<b>OFFICERS:</b> List the name, title, address a necessary).	and telephone number of each offi	icer (attach additio	nal pages if	
Officer Name and Title:		Teler	phone:	
Jerry Moretto, President	# 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		onone.	
Mailing Address:			Ser Base 11 and 1 and 1 and 1 are the service of th	
c/o Valley Distributing, Inc. 880 E. Front Street	et Fallon	NV	89406	
Street Name, Number	City	State	Zip Code	
Officer Name and Title:		Tele	hone:	
Robert McDonald, Secretary				
Mailing Address:				
c/o Nevada Beverage Co. 3940 W. Tropicana	Ave. LasVegas	NV	89103	
Street Name, Number	City	State	Zip Code	
Officer Name and Title:	ritir filosoforministronis. Otto sprimari Sampro pra pri pasa pri ustripo intervisio i usba skuldinis yakyakushidak i i indosi yakya yakya.	Teler	ohone:	
Robert McDonald, Treasurer				
Mailing Address:		-	î î	
c/o Nevada Beverage Co. 3940 Tropicana Ave Street Name, Number			89103	
·	City	State	Zip Code	
Officer Name and Title:		Telep	hone:	
Alan B. Blac, Director Mailing Address:	and analysis the second of the second second second of the second			
	TT7.17.		nona s	
c/o Great Basin Beverage, LLC PO Box 789 Street Name, Number	Wells City	NV State	89835 Zip Code	
AFFILIATIONS: If the PAC is affiliated wit of each organization (please attach addition	th any other organizations, list the	name, address an	d telephone numbe	
	nai pages it necessary).			
Name of Organization:	b	lelep	hone:	
Mailing Address:				
Maining Address.			$\begin{bmatrix} -1 & -1 & -1 & -1 & -1 & -1 & -1 & -1 $	
Street Name, Number	City	State	Zip Code	
Name of Organization:			Telephone:	
Committee of the commit	kit - Profit Miller (- and profit pro	in marketing in annual control of the state	th tell trush values do made debullementes é géogra regionnés etchie 1944 grap de Article 14 Artic	
Mailing Address:				
Association .				
Street Name, Number	City	State	Zîp Code	
Name of Organization:		Telep	Telephone:	
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Mailing Address:			,	
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Street Name, Number	City	State	Zip Code	
SUBMITTED BY:				
- ///////	Printed Name:	Date:	Telephone:	
X MULIINN	Alfredo Alonso	1/6/16	775-823-2900	
Signature of Representative of Group		1 1		

EL400 Revised: 11-5-15